



TPW 1638

## TRANSMITTAL FORM

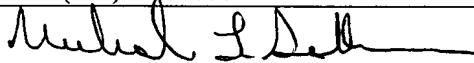
(to be used for all correspondence after initial filing)

		Application Number	10/524,750
		Filing Date	August 13, 2003
		First Named Inventor	Martin et al.
		Group Art Unit	1638
		Examiner Name	Medina A. Ibrahim
Total Number of Pages in This Submission	2	Attorney Docket Number	3213/104

### ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Reply (\$ _____)	<input type="checkbox"/> Declaration and Power of Attorney	<input type="checkbox"/> Appeal Communication to Group (\$ _____) (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition (\$ _____)	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request (\$ _____)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Application Data Sheet
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures
<input type="checkbox"/> Information Disclosure Statement (\$ _____)	<input type="checkbox"/> Terminal Disclaimer (\$ _____)	<input checked="" type="checkbox"/> A self-addressed, prepaid postcard for acknowledging receipt
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request for Refund	<input type="checkbox"/> Check in the amount of \$ _____
<input type="checkbox"/> Response to Notice to File Missing Parts/Incomplete Application (\$ _____)	<input type="checkbox"/> CD, Number of CD(s) _____	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): - Response to Restriction Requirement
<input type="checkbox"/> A copy of the Notice to File Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 14-1138 for the above identified docket number.

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Michael L. Goldman, Esq. Nixon Peabody LLP Clinton Square, P.O. Box 31051 Rochester, New York 14603-1051 Telephone: (585) 263-1304 Fax: (585) 263-1600	
Signature	 Registration No. 30,727	
Date	December 15, 2006	

### CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]

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12/15/2006

Date



Signature

Sherri A. Moscato

Typed or printed name



PATENT  
Docket No.: 3213/104

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants : Martin et al. ) Examiner:  
Serial No. : 10/524,750 ) Medina A. Ibrahim  
Cnfrm. No. : 6908 ) Art Unit:  
Filed : August 13, 2003 ) 1638  
For : BACTERIAL EFFECTOR PROTEINS WHICH )  
INHIBIT PROGRAMMED CELL DEATH )

**RESPONSE TO RESTRICTION REQUIREMENT**

**Mail Stop Amendment**  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

In response to the November 16, 2006, written restriction requirement, applicants hereby elect Group I (i.e. claims 1-6 and 103-109) with traverse.

Applicants, however, submit that the invention groups identified in the outstanding office action are closely related and, therefore, do not require separate search or consideration. Accordingly, it is respectfully requested that the restriction requirement be withdrawn and that all claims be examined together.

Respectfully submitted,

Date: December 15, 2006

Michael L. Goldman  
Registration No. 30,727

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Date

Signature  
Sherri A. Moscato  
Typed or printed name